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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full)						
	Russ Carnahan						
	(b) Address (number and street) 3150 ALLEN AVE	☐ Check if add	iress change	d	Candidate's FEC Identification Number H0MO00019		
	(c) City, State, and ZIP Code				3. Is This New Amended		
	ST LOUIS		RI 631		Statement X (N) OR (A)		
4.	Party Affiliation	5. Office Sought			rict of Candidate		
	DEMOCRATIC PARTY	House		MO	03		
	DE	SIGNATION OF P	RINCIPA	L CAMPAIGN	COMMITTEE		
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2012 (year of election)						
	NOTE: This designation should be filed with the appropriate office listed in the instructions.						
_	(a) Name of Committee (in full)						
	Russ Carnahan For	Congress					
	(b) Address (number and street) PO Box 190033						
	(c) City, State, and ZIP Code						
	St Louis			МО	63119		
8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy. NOTE: This designation should be filed with the principal campaign committee. (a) Name of Committee (in full) RUSS CARNAHAN IN CONGRESS COMMITTEE							
NOOG GANNAHAN IN GONGNEGO GONINITTEL							
	(b) Address (number and street) PO Box 190033						
	(c) City, State, and ZIP Code						
	ST LOUIS			MO	63119		
	I certify that I have exa	mined this Statement and	I to the best o	of my knowledge a	nd belief it is true, correct and complete.		
Si	Signature of Candidate Date						
	uss Carnahan		[Ele	ectronically Filed]	03/28/2012		
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.							

FEC FORM 2 (REV. 02/2009)

(c) City, State and ZIP Code

FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

FEC Form 2 (Rev. 02/2003)	Page 2 /
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend f candidacy.	unds on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full) Jared Polis Victory Fund 2012	
(b) Address (number and street) PO Box 1174	
(c) City, State and ZIP Code	
Springfield VA 22151	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend candidacy.	funds on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
(b) Address (number and street)	
(c) City, State and ZIP Code	
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives)	[ADDITIONAL]
I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend candidacy.	funds on behalf of my
NOTE: This designation should be filed with the principal campaign committee.	
(a) Name of Committee (in full)	
(b) Address (number and street)	